

AGENDA

A MEETING OF THE BOARD OF PUBLIC WORKS & SAFETY OF THE CIVIL CITY OF NEW ALBANY, INDIANA, WILL BE HELD IN 100 AT NEW ALBANY CITY HALL ON TUESDAY, FEBRUARY 24, 2026 AT 10:00 A.M.

CALL TO ORDER:

PLEDGE OF ALLEGIANCE:

BIDS:

NEW BUSINESS:

1. Mark Sutton with Lewen Lines LLC re: MOT Plan for crossing Hauss Sq. at Spring

COMMUNICATIONS – PUBLIC:

UNFINISHED BUSINESS:

TABLED ITEMS:

COMMUNICATIONS – CITY OFFICIALS:

1. Krystina Jarboe re: Special Event Permit
 - Saturday, August 1 – NAHS: 5k
2. Resolution regarding overnight parking in city lots
3. Mickey Thompson for Duke Energy re: Request to upgrade the overhead transformers on the pole in front of 1920 Indiana Ave. for service at 2401 Fairmount Ave.
4. Mickey Thompson for CenterPointe Energy re: Emergency repair of gas main at 620 Durgee Rd.

APPOINTMENTS:

CLAIMS:

APPROVAL OF MINUTES:

Regular Meeting Minutes for February 17, 2026

ADJOURN:

Board of Public Works & Safety Members

Michael Thompson; President; Appointing Authority: Mayor; Term Expires: 12/31/2027
David Brewer; Vice President; Appointing Authority: Mayor; Term Expires: 12/31/2027
Cheryl Cotner-Bailey; Member; Appointing Authority: Mayor; Term Expires: 12/31/2027

A MEETING OF THE BOARD OF PUBLIC WORKS & SAFETY OF THE CIVIL CITY OF NEW ALBANY, INDIANA, WAS HELD IN ROOM 100 AT NEW ALBANY CITY HALL ON TUESDAY, FEBRUARY 17, 2026 AT 10:00 A.M.

PRESENT: David Brewer, member, Cheryl Cotner-Bailey, member, and Mickey Thompson, president

OTHERS PRESENT: Fire Chief Juliot, Police Chief Bailey, David Heeke, Brad Hicks, Brad Fair, Mike Wallace, Brad Ramsey, Michael Mifflin, Ryan Hensley, Larry Summers and Vicki Glotzbach

CALL TO ORDER:

Mr. Thompson called the meeting to order at 10:04 a.m.

PLEDGE OF ALLEGIANCE:

BIDS:

NEW BUSINESS:

COMMUNICATIONS – PUBLIC:

Mr. Dustin Whitsett requested permission to place a dumpster at 1302 E. Main, on the 13th Street side, for a garage addition. He explained that there isn't any place on the property to put the dumpster, he will be using Gotta Go Dumpsters, and it will be on location for ~ two weeks.

Mrs. Cotner- Bailey asked if he has a drop date.

Mr. Whitsett replied February 23.

Mrs. Cotner-Bailey moved to approve for February 23-March 9, **Mr. Brewer** second, motion carries.

UNFINISHED BUSINESS:

1. Mickey Thompson re: Signage regarding overnight parking in city parking lots

Mr. Thompson stated he would entertain a motion to approve signage informing citizens that overnight parking is prohibited in all city parking lots from 2:00-6:00 a.m. He added that he doesn't believe this would apply to leased spaces in the parking garage.

Mr. Brewer moved to approve contingent upon review by the city attorney regarding the parking garage, **Mrs. Cotner-Bailey** second, motion carries.

TABLED ITEMS:

COMMUNICATIONS – CITY OFFICIALS:

1. Vicki Glotzbach re: Dumpster permit request for Tony Nava at 824 Jay Street

Mrs. Glotzbach stated that Tony Nava called this morning to request permission for a dumpster to be dropped tomorrow for two weeks. She added that he will be using Bin There Dump That and indicated that this will be his last dumpster request.

Mrs. Cotner-Bailey moved to approve for February 18-March 4, **Mr. Brewer** second, motion carries.

2. Mickey Thompson re: 2025 Paving Project Update

Mr. Thompson reported that no work was done because of the weather.

APPOINTMENTS:

CLAIMS:

APPROVAL OF MINUTES:

Mr. Brewer moved to approve the Regular Meeting Minutes for February 10, 2026, Mrs. Cotner-Bailey second, motion carries.

ADJOURN:

There being no further business before the board, the meeting adjourned at 10:16 a.m.

Mickey Thompson, President

Vicki Glotzbach, City Clerk

map
Flyer

2026



Special Event Permit Application

142 East Main Street, Suite 310
New Albany, IN 47150
812-948-5333

www.cityofnewalbany.com

Applicant and Host Organization Information

Host Organization – The Host Organization is legally and financially responsible for the overall permitting process, management and implementation of an event and its associated dynamics.

Host Organization Name: New Albany High School Athletics

Host Organization Event Representative – The event representative will be the main point of contact for all planning activities and day-of activities.

Event Representative and Title: Nick Ellis / Teacher + Coach

Host Organization Website: www.gonewalbany.com

Address: 1020

City: New Albany State: IN Zip Code: 47130

Work Phone: _____ Cell Phone: 574-370-8169

Email: nellis@nafcs.org

Please list any additional person, professional event organizer or service contractor hired by the Host Organization that is authorized to make decisions on the Host Organization's behalf for this event.

Name: Shawn Garmon

Company: New Albany HS

Email: Sgarmon@nafcs.org

Phone Number : _____

Name: Callahan Walts

Company: New Albany HS

Email: Cwalts@nafcs.org

Phone Number: _____

Why would you like to hold your event in New Albany?

We are a New Albany School. Our partnership with the city in previous years has been beneficial.

Banner Permit:

Will you be filling out a banner permit? Yes No

Please contact the City Clerk's Office for more information regarding the City's policy on banners and banner permits.

Event Specific Information

Event Name: New Albany 5000

Will this event be marketed as a family friendly event? Yes No (if yes, please attach flyer)

Will this event be marketed as a gun-free/weapon-free event? Yes No (if yes, please attach flyer)

Is this an annual event? Yes No

If yes, how many years has this event been happening? 5

Anticipated Attendance - The estimated amount of people expected at event. 75

Anticipated Participants - If the proposed event has registered participants, the estimated number expected. 70

Anticipated Number of Event Staff/Volunteers - 5-10

Event Description (including purpose, target audience and description):
Road Race/Walk to benefit the New Albany high school cross country teams

Requested Venue:
 Riverfront Amphitheater City Square
 Bicentennial Park Other (Specify) Greenway

Type of Event:
 Run/Walk Rally Parade Concert Wedding Ceremony/Photos
 Fair Picnic Other (Specify) _____

Proposed Event Date: 8/1/26 Day of the Week: Saturday
Set-Up Begin Time*: 6:30 AM/PM Set-Up End Time: 7:45 AM/PM
Event Begin Time: 9:00 AM/PM Event End Time: 9:15 AM/PM
Break-Down Begin Time: 9:15 AM/PM Break-Down End Time**: 9:30 AM/PM
Proposed Rain Date: NA Day of the Week: NA

* The Set-Up Begin Time is the time the venue reservation contract time begins and the earliest any event-related activity can happen in the venue/space.
**The Break-Down End Time is the time the venue reservation contract ends and the latest any event-related activity can happen in the venue/space.

Weather:
Is this event rain or shine? Yes No
Description of inclement weather plan:
Rain or shine. 30 minute delay for inclement weather. Then cancel the event.

Event Logistics:

Will normal operations of residents or businesses be affected by your event? Yes No

If yes, please **attach a copy of the notification letter to be approved by the Board of Public Works before being sent to the affected residents/businesses.**

Is this event open to the public? Yes No

Will you charge admission or participation fees? If so, what is the charge? What will the monies collected at this event go towards?

\$25. Revenue from the event purchases equipment for New Albany cross country

Comprehensive Map Information:

Purpose: details the layout of the requested area and gives City officials a clear idea of layout. A comprehensive map must be provided with the special event permit application.

Each comprehensive map must include:

1. An outline of the entire requested event area.
2. Label street(s) requested for closure and mark locations of barricades. If the event involves a route, please indicate the direction of travel and have barricade placement clearly marked.
3. Location of all physical equipment and structures being placed within the event site (i.e. staging, tents, portable restrooms, production equipment, tables, chairs, fencing, vendors, etc.).
4. Location of generators or other electrical equipment (if applicable).
5. Location of food, beverage, or alcohol area (if applicable). It is required by the State of Indiana for premises that are not part of an approved designated outdoor refreshment area (DORA) must be well-defined with a fence, rope, or other similar enclosure that reasonably deters ingress and egress.
6. Trash and recycling receptacles.
7. Entry and exit locations.
8. Location of accessible viewing area.
9. Requested general parking and accessible parking areas.
10. All requests for reserving the amphitheater **MUST** have volunteers stationed on both sides of the railroad. Please indicate these volunteers on site plan/route map.

Have you attached a site plan/route map to your special event permit using these criteria? Yes No

Road Closure Request:

Do you require a road closure? Yes No

If yes, list the street or lane closures:

Closure Type (full or partial lane)	Street Name	Start Date	Start Time	End Date	End Time

Security and First Aid:

Will you have contracted security? _____ Yes No

Number of security personnel on-site for event: _____

Please list the provider of contracted security:

Company: _____

Contact Name: _____

Email: _____

Phone Number: _____

On attached map, please include where contracted security will be located.

Will you have a first aid kit on site? Yes _____ No

Will you have an on-site provider of primary first aid? Yes _____ No

Please list the provider of first aid:

Company: Korte

Contact Name: Leeanne Higdon

Email: _____

Phone Number: _____

On attached map, please include where first aid kit(s) and/or provider of first aid will be located.

Will you request the New Albany safety/traffic control services? _____ Yes No

If yes, please explain your request: _____

Food and Beverage:

Will there be concessions at your event? _____ Yes No

If yes, describe:

On attached map, please include where each concession will be located.

Please note all food vendors must obtain a license from the Floyd County Health Department.

Alcohol:

Will alcohol be served at your event? _____ Yes No

If yes, is alcohol going to be served within the DORA? _____ Yes No

If alcohol will be served outside of DORA, what will alcohol floor plan be enclosed with? _____

On attached map include a well-defined area where alcohol will be located.

Please note, a representative from the Host Organization to attend the Board of Public Works meeting at least 60 days in advance to answer any questions regarding their event.

Fencing:

Will you have fencing? _____ Yes No

Please list the provider of fencing:

Company: _____

Contact Name: _____

Email: _____

Phone Number: _____

Date and time fencing will be set up: _____

Date and time fencing will be taken down: _____

On attached map, please include where fencing will be located.

Restrooms:

Will you be requesting use of the amphitheater restrooms? Yes _____ No

(Amphitheater restrooms are closed due to winterization November 1st to March 1st each year.)

If yes, what time will you request the restrooms be open? 6:30 AM/PM

If yes, what time will you request the restrooms be closed? 9:30 AM/PM

If no, please list the provider of portable restrooms:

Company: _____

Contact Name: _____

Email: _____

Phone Number: _____

Date and time portable restrooms will be dropped off: _____

Date and time portable restrooms will be picked up: _____

Total number of portable restrooms on site: _____

Will you have ADA portable restrooms on site? _____ Yes _____ No

On attached map, please include where the portable restrooms will be located.

Equipment and Decorations:

DO NOT put nails or staples into trees/structures or stake anything in the ground.

Will you use tents? _____ Yes No

What type of tents will be used? _____

What will be used to weigh tents down? _____

Will other temporary structures be used? _____ Yes No

If yes, what other temporary structures will be used? _____

On attached map, please include where tents and temporary structures will be located.

Trash Plan:

How will trash be monitored during and after your event? How will trash be removed from premises after the event?

Volunteers will follow the slowest walker and collect trash. DURING & AFTER EVENT.

Number of trash receptacles: 2 ALL TRASH WILL BE DISPOSED OF OFF-SITE.

Number of recycling receptacles: 0

Please list the provider of trash services:

Company: _____

Contact Name: _____

Email: _____

Phone Number: _____

On attached map, please include where trash cans will be located.

Entertainment Activities:

Will you have music? _____ Yes No

If yes, list the time(s) of music during the event:

If yes, what type of music/amplification?

On attached map, please include where the entertainment activities will be located.

Will you have inflatables? _____ Yes No

If yes, please list the inflatable provider:

Company: _____

Contact Name: _____

Email: _____

Phone Number: _____

On attached map, please include where inflatables will be located.

Electric:

Will you use electricity? _____ Yes No

Will you use generators? _____ Yes _____ No

Outdoor extension cords must be 3-prong UL listed extension cords.

On attached map, please include where the generators or other large electrical equipment will be located.

Describe electrical usage:

Affidavit of Application:

Everything that I have stated on this Special Event Permit Application is correct to the best of my knowledge. I have read, understand and agree to abide by the polices, rules and regulations listed on this and all applicable forms, including the City of New Albany ordinances, as they pertain to the requested usage. Applicant agrees and understands any significant damage to city property will be the sole responsibility of the applicant. By signing this application, the applicant agrees to follow all rules and regulations and city ordinances. The permit, if granted, is not transferrable and is revocable at any time at the absolute discretion of the New Albany Board of Public Works. All programs and facilities of the City of New Albany are open to all citizens regardless of race, sex, age, color, religion, national origin and abilities.

Name of Applicant (please print): NICK ELLIS

Signature: *Nick Ellis*

Date: 2/5, 2026

**Completed Special Event Permit Applications may be mailed or delivered in person to:
City of New Albany, ATTN: Krystina Jarboe
142 East Main Street, Suite 310
New Albany, IN 47150**

**Completed Special Event Permit Applications may also be emailed to Krystina Jarboe at:
kjarboe@cityofnewalbany.com**

Office Use Only

Taken under advisement

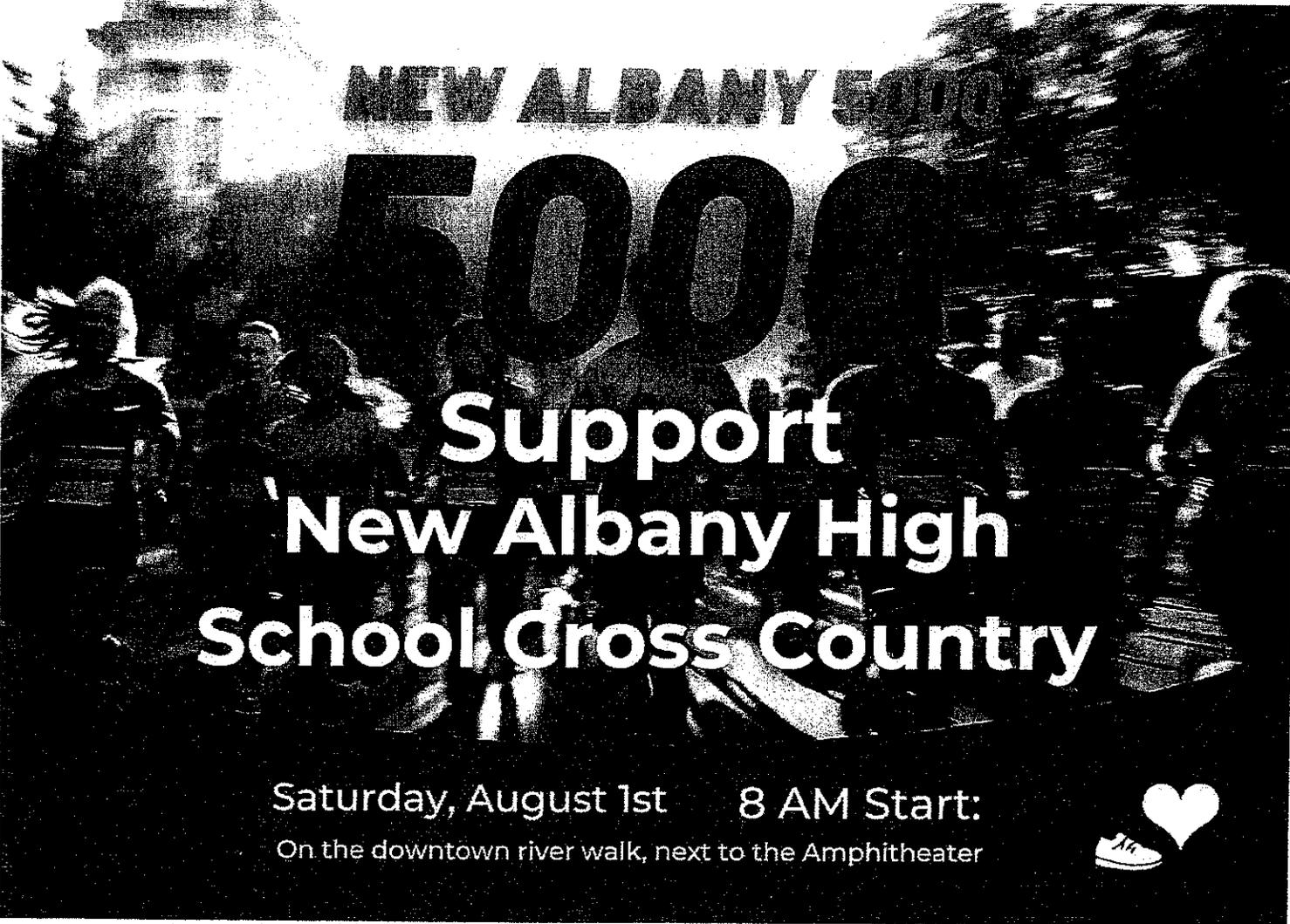
Approved

Denied

Signed: _____
(Board of Works President)

Date: _____, 2026

Notes:



NEW ALBANY 5000

5000

**Support
New Albany High
School Cross Country**

Saturday, August 1st 8 AM Start:

On the downtown river walk, next to the Amphitheater



BEFORE THE BOARD OF PUBLIC WORKS AND SAFETY FOR THE CITY OF
NEW ALBANY, INDIANA

RESOLUTION NO. BOW-022026

A RESOLUTION ESTABLISHING HOURS OF CLOSURE FOR CITY-OWNED OFF-
STREET PARKING FACILITIES AND AUTHORIZING REMOVAL OF
UNAUTHORIZED VEHICLES

WHEREAS, the City of New Albany owns and maintains certain off-street parking facilities; and

WHEREAS, the Board of Public Works and Safety is charged under Indiana Code § 36-9-6 with supervision and control of municipal property; and

WHEREAS, Indiana Code § 36-1-3 grants the City authority to manage municipal property and protect public safety; and

WHEREAS, the Board finds that establishing uniform hours of closure promotes safety, allows for cleaning and maintenance, facilitates snow and ice removal, and preserves City assets;

NOW, THEREFORE, BE IT RESOLVED by the Board of Public Works and Safety of the City of New Albany, Indiana, as follows:

Section 1. Applicability.

This Resolution applies to all City-owned off-street parking lots and parking facilities unless specifically exempted by action of the Board. The Market Street Parking Garage is exempted from this requirement.

Section 2. Hours of Closure.

City-owned off-street parking facilities shall be closed daily between 2:00 a.m. and 6:00 a.m. No vehicle shall remain parked in such facilities during these hours unless expressly authorized by the City.

Section 3. Unauthorized Vehicles.

A vehicle remaining in a City-owned off-street parking facility during closed hours shall be deemed an unauthorized use of municipal property.

Such vehicles may be removed at the direction of the New Albany Police Department or other authorized City official. Removal shall be conducted pursuant to applicable state law and the City's established towing procedures.

Section 4. Exceptions.

The following vehicles are exempt from this Resolution:

- Emergency vehicles while performing official duties;
- City-authorized vehicles;
- Vehicles expressly permitted in writing by the City.

Temporary exceptions may be granted by the Chief of Police or the Board.

Section 5. Notice.

Appropriate signage stating the hours of closure and that unauthorized vehicles are subject to removal shall be posted at entrances or visible locations.

Section 6. Emergency Conditions.

Nothing herein limits the City's authority to remove vehicles during snow events, maintenance operations, or emergencies.

Section 7. Effective Date.

This Resolution shall take effect upon adoption and posting of appropriate signage.

ADOPTED this ___ day of _____, 2026.

**BOARD OF PUBLIC WORKS AND
SAFETY OF THE CITY OF NEW
ALBANY, INDIANA**

By: _____
Michael Thompson, President

Attested by:

Vicki Glotzbach, New Albany City Clerk



BOARD OF PUBLIC WORKS AND SAFETY
 NEW ALBANY CITY HALL
 142 EAST MAIN STREET, SUITE 200
 NEW ALBANY, IN. 47150

NAPWPermits@cityofnewalbany.com

Date
Office Use Only

APPLICATION - ENCROACHMENT PERMIT

PERMIT NUMBER: _____

1. ENCROACHMENT LOCATION INFORMATION

Address or Location of Encroachment: 2401 Fairmont Ave

Subdivision or Development Name: _____

2. CONTRACTOR/UTILITY APPLICANT INFORMATION

Contractor/Utility name: Duke Energy Contact Name: Todd Donahue

Address: 1212 Eastern BLVD City: Clarksville State: IN Zip: 47129

Phone: 812-914-2417 Email: Todd.Donahue@duke-energy.com

Subcontractor name: _____ Phone: _____

3. OWNER INFORMATION

Property owner's name: FOTIOS MORAITIS Phone: 859-489-3445

Email: fotiblabla@yahoo.com

4. ENCROACHMENT INFORMATION

a. Please describe proposed work: OVERHEAD TRANSFORMER UPGRADE IN RIGHT OF WAY.

Transformer being upgraded to accomodate additional load.

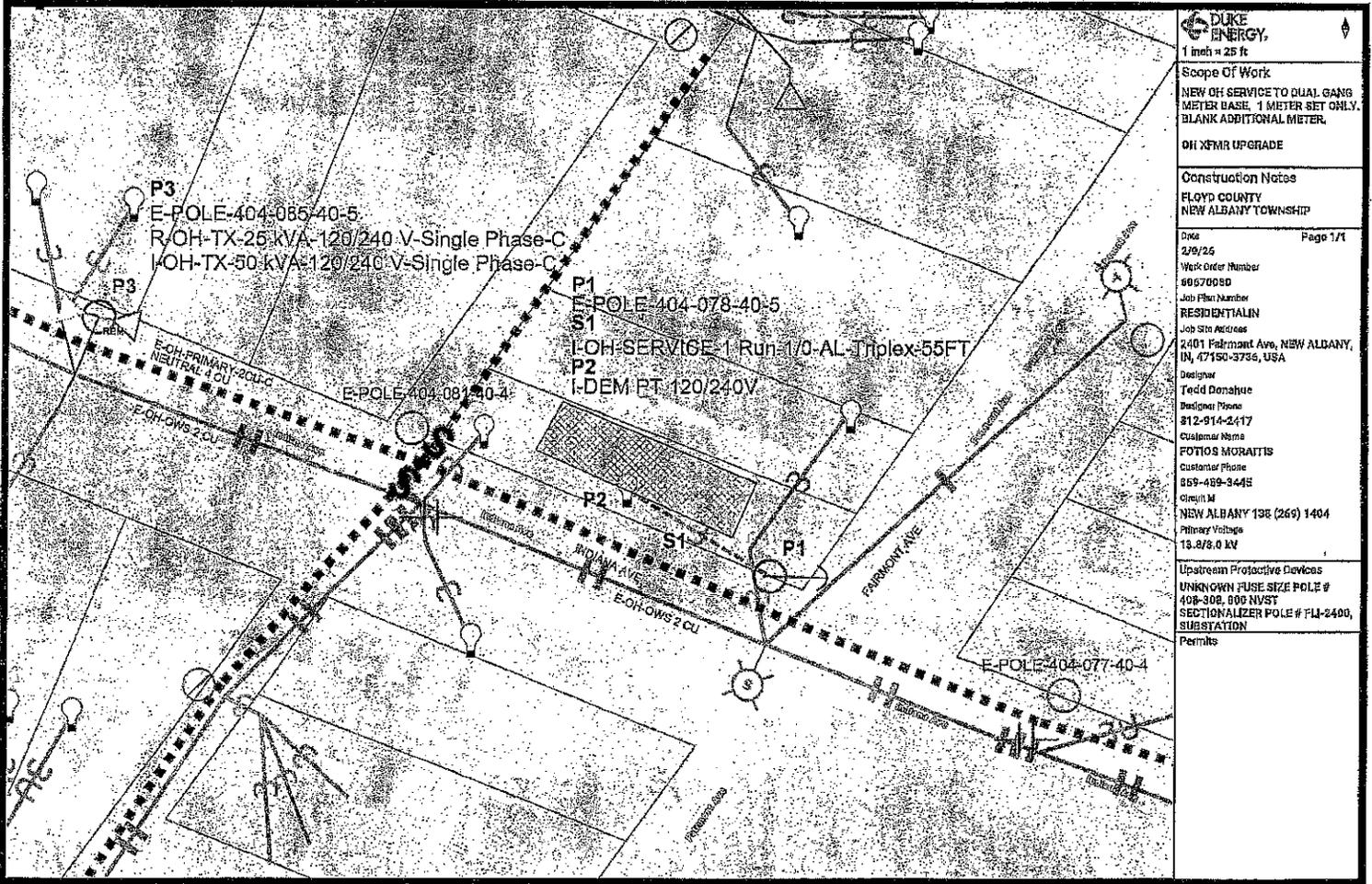
- b. Location of Work: Street Alley Sidewalk City Right-of-Way Easement
- c. Type Cut Bore Trench Aerial Other (explain) _____
- d. Type of Construction Water Gas Electric Telephone CATV Fiber Optic
- Sewer Stormwater Other (explain) _____
- e. New Construction Existing Construction Sidewalk Construction Street Trees
- f. Surface Type Concrete Asphalt Brick/Paver Gravel/Dirt/Grass
- Other (explain): _____

g. Total width of traffic portion of street or road affected by permit (in feet): _____ Length (in feet): _____

h. Number of Traffic Lanes 1 Road Closed? Yes* No If yes, duration: _____

*May require Board of Works Approval

Estimated Project Start Date: 4/6/2026 Estimated Project Completion: 4/11/2026



DUKE ENERGY
 1 inch = 25 ft

Scope Of Work
 NEW OH SERVICE TO DUAL GANG METER BASE, 1 METER SET ONLY. BLANK ADDITIONAL METER.

OH XFMR UPGRADE

Construction Notes
 FLOYD COUNTY
 NEW ALBANY TOWNSHIP

Date: 2/9/26 Page 1/1
 Work Order Number: 80670050
 Job Plant Number: RESIDENTIAL IN
 Job Site Address: 2401 Fairmont Ave, NEW ALBANY, IN, 47150-3735, USA
 Designer: Tedd Donahue
 Designer Phone: 812-914-2417
 Customer Name: FOTIOS MORAITIS
 Customer Phone: 859-489-3445
 Circuit ID: NEW ALBANY 13E (269) 1404
 Primary Voltage: 13.8/8.0 kV

Upstream Protective Devices
 UNKNOWN FUSE SIZE POLE # 408-308, 000 MVST
 SECTIONALIZER POLE # FLI-2400, SUBSTATION

Permits

From: Mickey Thompson mthompson@cityofnewalbany.com 
Subject: 2401 Fairmont Ave. (Indiana Ave. side)
Date: February 19, 2026 at 12:07 PM
To: Mickey Thompson mthompson@cityofnewalbany.com



Sent from my iPhone



BOARD OF PUBLIC WORKS AND SAFETY
 NEW ALBANY CITY HALL
 142 EAST MAIN STREET, SUITE 200
 NEW ALBANY, IN. 47150
 NAPWPermits@cityofnewalbany.com

	Date Office Use Only
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APPLICATION - ENCROACHMENT PERMIT

PERMIT NUMBER: _____

1. ENCROACHMENT LOCATION INFORMATION

Address or Location of Encroachment: 620 Durgue Rd Emergency repair

Subdivision or Development Name: _____

2. CONTRACTOR/UTILITY APPLICANT INFORMATION

Contractor/Utility name: Centerpoint Energy Contact Name: Dorothy Miller

Address: 4001 Progress Way City: Sellersburg State: IN Zip: 47172

Phone: 812-948-4955 Email: dorothy.miller@centerpointenergy.com

Subcontractor name: _____ Phone: _____

3. OWNER INFORMATION

Property owner's name: _____ Phone: _____

Email: _____

4. ENCROACHMENT INFORMATION

a. Please describe proposed work: Emergency repair completed on 2/4. 300' east of Barack Obama Way and 6' north of centerline of Durgue Rd. Excavation in street 5X6X7

- b. Location of Work: Street Alley Sidewalk City Right-of-Way Easement
- c. Type Cut Bore Trench Aerial Other (explain) _____
- d. Type of Construction Water Gas Electric Telephone CATV Fiber Optic
 Sewer Stormwater Other (explain) _____
- e. New Construction Existing Construction Sidewalk Construction Street Trees
- f. Surface Type Concrete Asphalt Brick/Paver Gravel/Dirt/Grass
 Other (explain): _____

g. Total width of traffic portion of street or road affected by permit (In feet): 6 Length (In feet): 7

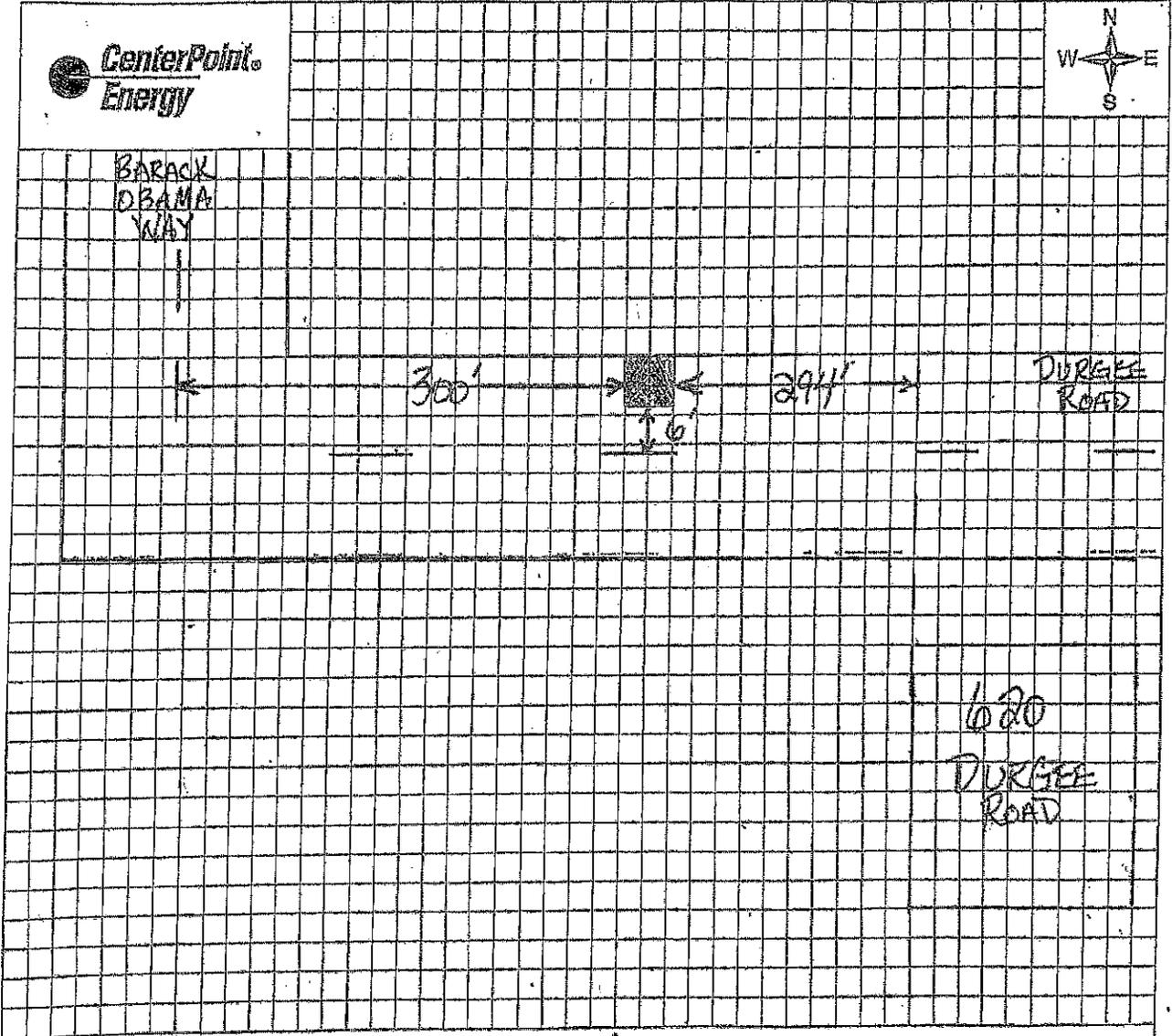
h. Number of Traffic Lanes _____ Road Closed? Yes* No If yes, duration: _____

*May require Board of Works Approval

Estimated Project Start Date: 2/4/26 Estimated Project Completion: 2/4/26

SAP #: 121086852
 Address: 1020 DURGEE ROAD
 City: NEW ALBANY
 County: FLOYD
 Township: _____

Submitted by: KARLA DAVENPORT Phone #: 765-429-7873
 Date permit needed by: 2-4-2026 (allow 5+ business days)
 Permit Type: City County INDOT (MOT Page # _____)
 Project: New Service Retire Service Replace Service
 Repair Service EMERGENCY Repair completed



Excavation is 300' N S E W of centerline of BARACK OBAMA WAY -and-
6' N S E W of centerline of DURGEE ROAD

ROW Method(s): Bore Tap Pit Trench Cut
 ROW Area(s): Street Sidewalk Alley Other
 ROW Surface(s): Asphalt Concrete Gravel Grass
 Excavation dimensions: 5' D x 6' W x 7' L
 Service Length: _____' Bore Length: _____' (if applicable)

Lane Closure: Yes No
 Road Closure: Yes No
 Heavy Equipment: Yes No
 Notes: _____

From: Mickey Thompson mthompson@cityofnewalbany.com
Subject: 620 Durgess Rd.
Date: February 19, 2026 at 10:26 AM
To: Mickey Thompson mthompson@cityofnewalbany.com



Sent from my iPhone